

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	96		1/26/87
O.I.P.E. CLASSIFIER		8	9-6-87
FORMALITY REVIEW	71-41	71629	10-11-00
RESPONSE FORMALITY REVIEW	71-41	7162P	1-8-01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	Original
1 ✓	1/26/87
2 ✓	5/1/87
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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